

Prosocial Treatment Models with Juveniles Who Sexually Offend

Norbert Ralph, Ph.D.

Cortoni (2010) at the annual ATSA-Phoenix convention presented prescriptions for the future direction of treatment for those with sexual offending behaviors. She chronicled the brief history of treatment for adults, including the initial adoption of relapse prevention approaches, a model that was understandable and gave clinicians something concrete and practical. She cited Laws' (1989) caution that while relapse prevention looked promising, there was no definite evidence that it worked to reduce recidivism. Although lacking evidence supporting its efficacy, it quickly became the treatment of choice because it "made sense" and was "easy to use."

Ralph (2011), treatment for juveniles with sexual offending behaviors (JSO) took a parallel course. There was wide scale adoption of relapse prevention approaches, and the use of the sexual offending cycle. Kahn's workbook *Pathways* (2001) became for many not only a required text, but largely defined treatment. Adolescent JSO treatment models usually derived from adult models, with no attention to the research regarding adolescent development, the factors that influence development, or evidence regarding program effectiveness. There were notable exceptions, such as the SAFE-T program in Toronto which developed effective adolescent specific services (Worling, Littelljohn & Bookalam, 2010), but these were the exception, not the rule.

Prosocial Models: Ralph, (2011) describes effective evidence-based models available for adolescent JSO treatment as Prosocial models. Prosocial models, as defined based on research, which identifies deficits in social skills, social reasoning, and emotional regulation, as modifiable criminogenic risk factors for reducing recidivism for probation youth generally, and for JSO youth specifically. Increasing prosocial thinking and skills is the goal. These models, based on research regarding how both average and probation youth develop social problem solving and emotional controls. Probation youth are about four years behind non-probation youth on objective measures of social

analysis and problem solving. Washington State's research found one prosocial approach, Aggression Replacement Training (ART) (Goldstein, Glick, & Gibbs, 1998), to be the most cost effective treatment for probation youth, and with competent implementation, had a benefit/cost ratio of \$11.66 (U.S. Department of Justice). If ART was not competently delivered, there was a negative effect, and cost \$3.10 more than the benefits. The ART model while demonstrating effectiveness with probation youth generally had not been evaluated specifically for JSO youth.

The Prosocial model is practical to implement, gives youth and staff a positive and optimistic "narrative"; that is a clinically useful tool. Relapse prevention and sexual abuse cycle models tend to invoke a negative "narrative" regarding offending youth (i.e., targeting denial of responsibility/culpability, lying, lack of victim empathy, lack of insight, manipulation, and conduct disordered patterns of thinking and behavior). Prosocial models identify the same problematic behaviors, while at the same time target social perception, moral reasoning, emotional regulation, and social skills. These are areas in which teens normally develop, and Prosocial treatment models can accelerate this process. This Prosocial view provides a more optimistic and positive narrative of JSO treatment, which is also scientifically accurate. It gives youth concrete practical life coping tools and the realistic hope that they can have prosocial lives and rewards.

Other Effective Models: ART is an effective model for other probation teens. Lipsey (2009) showed adolescent probation youth, the largest mean effect sizes were in programs that used manualized and cognitive behavioral methods, including ART. However, other methods were also effective, if well implemented and targeting higher risk youth. Reitzel and Carbonnel (2006) did a meta-analysis of nine studies of JSO treatment, total sample size of $N=2968$ primarily adjudicated male youth. Those in treatment had a sexual recidivism rate of 7.37% versus 18.93% for those not receiving treatment, which was statistically and clinically significant. Borduin, Shaffer, and Heiblum (2009) in their study of Multisystemic Therapy

Chair's Corner

Long Live the Chair!

The phrase “Long Live the King” is a traditional proclamation made following the accession of the new monarch. I borrowed and modified the phrase as a way for all of us to welcome the new incoming CCOSO Officers. Leesi Herman will be the new Chair, Tiffany Rector, Vice Chair, Pat McAndrews, Treasurer, Araceli Cabarcas, Recorder and Chris Bennet, Correspondent. They will be assuming their new positions beginning 2011, and I am confident that these very talented and dedicated individuals will move CCOSO forward in our ongoing quest to stop sexual abuse with new ideas and great energy.

During my tenure as Chair and Vice Chair over these last four years, we have experienced a nationwide financial meltdown, but we are still here and our prospects for the future are great. While I have been in this position with CCOSO, with the push, prodding, and determination of Tom Tobin along with Suzanne Brown-McBride of CALCASA, CCOSO can take credit for helping to create the California Sex Offender Management Board (CASOMB).

What has CASOMB done for us lately? They have helped steer our law makers away from passing laws that are misguided emotional reactions to horrific sexual crimes. CASOMB, with CCOSO membership input, is offering advice and guidance on policy concerns regarding sex offenders that is evidence based. A case in point is the AB 1844, Chelsea King Child Predator Prevention Act of 2010. CASOMB worked with Legislators on the development of this new law.

During my tenure, our committees have been very active and productive. Some of CCOSO’s committees have published significant documents, the Guidelines and Best Practices, Adult Male Sex Offenders 2010, Chaired by Chares Flinton, Ph.D., produce a very informative document. The Civil Commitment Committee, Chaired by Deirdre D’Orazio Ph.D., produced a detailed description of civil commitment process, California Sexually Violent Predator Statute. Also, our online Library continues to grow and has become an increasingly impressive resource for CCOSO Members.

We have seen the rise of technology while I have been Chair. Although in-person Board meetings remain an invaluable way to get things done because of the

personal connections, our budget reality requires that we learn how to communicate differently. Sean Carey, Education Community Chair, actually knows something about computers and has helped CCOSO run its Board meetings using WebEx online. This has been an illuminating experience and looks like a promising way for us to continue getting CCOSO business done.

Over the last four years, I have been involved with our Conference Committee, which puts together and runs professional conferences that attract a broad collaborative of stakeholders involved in sex offender management. Our conferences have brought together many hundreds of mental health providers, victim advocates, probation and parole officers, adult and juvenile state correctional personnel, law enforcement professionals, private attorneys, public defenders and prosecutors, and other community services, all in the same rooms. CCOSO Conferences have provided the most updated professional training to agencies and individuals that are dedicated to addressing the complex issues related to sex crimes and sexual deviance. Our Conferences offer topnotch professional training and are consistently well attended by a variety of participants, including leading experts in the field, from throughout the U.S., even during these tough financial times.

You will note during my listing of accomplishments over these years, I have only mentioned the work of other Board members. The reason for this is that I have been privileged to work alongside a group of incredibly talented individuals that have volunteered hundreds of hours in accomplishing our mission of stopping sexual abuse. It is through their efforts that I can proudly say with no sense of modesty that I have done a great job, but I am not satisfied because we haven’t yet stopped sexual abuse. Therefore, I hope to be able to continue to contribute to the CCOSO mission for many years to come.

Thank you, CCOSO members, for the privilege of serving you as Chair.

Wesley B. Maram, Ph.D.
CCOSO Chair

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What is CCOSO?

California Coalition On Sexual Offending

Together We Can End Sexual Abuse

The California Coalition on Sexual Offending (CCOSO) was founded in 1986 in response to a growing need throughout the state for an organized network of professionals working to respond to sexual offending. The wide variety of professionals who constitute CCOSO membership provides a solid foundation for collaboration in research, treatment, and containment to develop effective approaches in treatment and supervision practices and to influence state policy.

CCOSO is a recognized leader in providing expertise, training, education, and legislative guidance in treatment, management and research related to sexual offending. CCOSO and its chapters strengthen local and statewide agencies and professionals to enhance community safety.

VISION: A World Without Sexual Abuse

MISSION: Together We Can End Sexual Abuse

CCOSO Quarterly Newsletter

Perspectives is published quarterly for and on the behalf of the membership. Our goal is to help our membership keep up on current clinical information, research findings, and public policy issues relating to sex offenders. We hope to provide information that is useful for treatment professionals and other individuals involved directly or indirectly with sex offenders or sexual abuse.

Potential Authors/Contributors:

Contributors are invited to submit articles, features, and anything else related to their work with sex offenders. Submissions should include article title, author's name and professional association. Summaries or replications of other authors' original work must be accompanied by permission of the author. Articles must be typed and sent in a standard word processing format to L.C. Miccio-Fonseca, PhD, Editor, at lcmf@cox.net. A reasonable length for submission is two single-spaced pages.

Next Deadline: January 20, 2011

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Perspectives Newsletter:

Our intent is to provide an informative and quality newsletter with information and research findings for those professionals and individuals involved either directly or indirectly with sex offenders or sexual abuse.

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**CCOSO's 14th Annual Training Conference
Together We Can End Sexual Abuse and
Our 25th Year Anniversary May 11-13, 2011**

Dear esteemed colleagues and friends, our yearly CCOSO conference is rapidly approaching and the conference committee is working diligently to provide you with another impressive, thought-provoking, and inspirational conference for 2011. The 14th Annual Training Conference sponsored by the California Coalition on Sexual Offending will be held at the San Mateo Marriott in San Mateo, California, May 11-13, 2011. The Call for Papers has been mailed and can also be found on our website at www.ccoso.org. We invite you to submit! We are anticipating several inspirational workshops by distinguished presenters covering a variety of areas of interest i.e. dealing with state law, special population offenders like low intellectual offenders, the juvenile offender and female sex offenders. *Do not delay*, submit your proposal! Please send all responses to Trudy Orlandi at: trudy@cristoff.com.

We design a conference to serve a variety of different professionals in this ever challenging and important field of working with victims and those who engage in sexually abusive behaviors from children to adults. We offer pre-conference workshops, held on Wednesday, May 11, 2011. Pre-Conference Workshops are offered in part-day and full-day training blocks and are designed to enhance attendee's skills and knowledge in specific areas of focus. This year our Keynote speaker for the conference is Bob Schilling. An added benefit is that CCOSO offers the attendees the bulk of their 30 hours bi-annual trainings needed for the new law AB1844, Chelsea's Law.

Remember, Continuing Educational Credits (CEU's) are offered in one's area of specialty; i.e., psychologists, LCSW's MFT's, RNs, attorneys and and Group Home Administrators) and we will apply for STC training credits for our Pre-conference venue, please make sure to check with your local Training Officer. We look forward to hosting you in beautiful Northern California, San Mateo, 2011. Come, network, mingle and relax at our annual Mixer and Luncheon, sponsored by CCOSO. We look forward to seeing you there!

As our conference continues to take shape, the committee is working on bringing you another exciting and rewarding training. Visit our website for current information and remember, save the date and register early!

Warmly,

Shannon Smith, LCSW
CCOSO Conference Chair 2011

**A Research FYI
Research on Adjudicated
Male Adolescent Sex Offender**

L.C. Miccio-Fonseca, Ph.D.

A recently published research on adjudicated male adolescent sex offender by Michael C. Seto and Martin L. Lalumie're (2010) has been the topic of conversation amongst professionals who work with youth. Seto and Lalumie're tested special and general explanations of male adolescent sexual offending by conducting a meta-analysis of 59 independent studies comparing male adolescent sex offenders ($n=3,855$) with male adolescent non-sex offenders ($n=13,393$) on theoretically derived variables reflecting general delinquency risk factors (antisocial tendencies), childhood abuse, exposure to violence, family problems, interpersonal problems, sexuality, psychopathology, and cognitive abilities. Their results did not support the notion that adolescent sexual offending be explained as a simple manifestation of general antisocial tendencies. Seto and Lalumie're reported adolescent sex offenders had much less extensive criminal histories, fewer antisocial peers, and fewer substance use problems compared with non-sex offenders. Seto and Lalumie're found support for the special explanations suggesting a role for sexual abuse history, exposure to sexual violence, other abuse or neglect, social isolation, early exposure to sex or pornography, atypical sexual interests, anxiety, and low self-esteem. Explanations focusing on attitudes and beliefs about women or sexual offending, family communication problems or poor parent-child attachment, exposure to nonsexual violence, social incompetence, conventional sexual experience, and low intelligence were not supported. Ranked by effect size, the largest group difference was obtained for atypical sexual interests, followed by sexual abuse history, and, in turn, criminal history, antisocial associations, and substance abuse.

Michael C. Seto and Martin L. Lalumie're (2010). What Is So Special About Male Adolescent Sexual Offending? A Review and Test of Explanations Through Meta-Analysis. *Psychological Bulletin American Psychological Association*, Vol. 136, No. 4, 526-575.

Update from Recipient of the 2009 CCOSO Research Grant Award

As recipient of the *2009 CCOSO Research Grant*, this brief notation is in accord with providing the *CCOSO-Board* the progress of the cross-validation of the innovative risk assessment tool *MEGA* for youth, ages 4-19 years, males and females, and low intellectually functioning youth.

The cross-validation study on *MEGA* risk assessment tool for youth of all ages as well as an outcome measure (i.e., having the ability to measure change in risk level over time) is close to completion. To date the collected cross-validation data ($N=1400+$) has exceeded the validation sample ($N=1184$). The data pool for the cross-validation comes from USA (the states of California and Kentucky), Canada (London, Ontario), England (London, Liverpool, and Manchester), and Scotland (Glasgow). Anticipated data analysis hopes to provide normative data for the different countries represented in the study.

Post-cross validation will continue to be on an ongoing basis or the purposes of building a global database of normative data. *MEGA* now translated in Hebrew and Dutch and is currently in discussion for consideration to be used in these countries (Israel and Holland) as well.

The cross-validation commenced July 2008 and will close early 2011; data analysis will be available for presentation in CCOSO's May 2011 conference, with results also being submitted to peer reviewed journals. *MEGA* will be made available in early 2011; parties interested in additional information are to contact L.C. Miccio-Fonseca, Ph.D. (E-mail: lcmf@cox.net; phone 619. 293. 3330).

I again sincerely thank the *CCOSO Board* for the *2009 CCOSO Research Grant*; it has greatly assisted this groundbreaking research.

Respectfully,

L.C. Miccio-Fonseca, Ph.D.

Prosocial Treatment Model Continued from page 1

(MST) with JSO youth, showed the MST group had an 8% sexual recidivism rate versus the standard treatment group, which had a 46% rate. An important element of their program was social skill and problem solving components, which promoted age appropriate peer relationships. Worling, Littlejohn, and Bookerlam (2010) reported a follow up from the SAFE-T program in Toronto. They reported a 20-year recidivism rate of 9 percent for their program compared to a 21 percent rate for a matched comparison group. A component of the SAFE-T program was improving social relationships, and pro-social sexual attitudes and knowledge. The research findings indicate the effectiveness of treatment to reduce recidivism generally for probation youth, and specifically for JSO youth and the importance of social skill development in JSO treatment. ART and related approaches such as Thinking for a Change (Bush, Glick, & Taymans, 1997) have evidenced based models for improving prosocial skills and reasoning.

A Prosocial Intervention with JSO Youth: A modest attempt to demonstrate the effectiveness of a prosocial model carried out in cooperation with Teen Triumph of Stockton. The ART model used there had modifications based on updated research not available in the original ART publication (see Ralph, 2011). The research did two things not previously done with ART type models, that is: (a) used a true randomized design, and (b) used it with a JSO population. A sample of 17 youth participated, and a time series randomized design used. A randomized design permits the ruling out of alternative hypotheses as accounting for any observed change, usually regarded as an optimal research design for this reason. The sample all adjudicated males averaged 15.7 years old, and the mean JSORRAT-2 score was 5, in the moderate risk range. The percent in special education was 59%, and youth had an average of 11.3 months in treatment.

When randomization done, there were nine experimental and eight control youth. The Youth Outcomes Questionnaire (Y-OQ) (Burlingame, Wells & Lambert, 2004) used as an outcome measure, and had six scales measuring psychiatric functioning. The scales: Intrapersonal Distress, Somatic, Interpersonal Relations, Critical Items, Social Problems, and Behavioral Dysfunction scale and were completed by staff at the youth's residential house; staff were blind to the treatment condition. The Y-OQ administered six times before, during, and after the intervention.

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ART is a group-based intervention and all treatment provided in groups. Each of the three group based modules for ART were used: Social Skills, Anger Control, Moral Reasoning, and each module had ten sessions. The intervention carefully followed the program, and training model and targeting higher risk youth. The program implemented faithfully according to the ART model; training given, since research, showed rigorous implementation was associated with better outcomes. Each of the modules was done weekly for a total of three groups a week. The complete ART intervention done in a little over 10 weeks, and had 30 group sessions. The control group was given a psycho-educational curriculum on teen adjustment.

Quantitative Results: After the intervention, the ART group showed significantly less distress ($p < .05$ with a two tailed test), on two scales, Critical Items and Somatic. These scales had effect sizes of -1.35 and -1.22 respectively, classified as very large, in part due to the small sample size. A third scale, Interpersonal Distress, showed marginal significance ($p = .15$). It was hypothesized that decrease in scale scores in the direction of less distress, were due to an increase in social problem solving and skills for the ART treatment. Youth in the ART treatment group were hypothesized to feel more social competence and less distress. My view is that deficits in social skills and reasoning are modifiable criminogenic factors. They are contributory to chronic frustration and judgment deficits that are a factor in sexual offending.

Quantitative Results: The above hypothesis, that the treatment group's participants had reduced frustration by increasing social competence, was confirmed in qualitative follow-up research interviewing the ART participants, and staff who ran the ART groups. Youth described an increased sense of social competence, ability to delay impulsive acting out, and found more appropriate and effective alternatives. Staff implementing the program also found ART effective with youth, and helped provide a useful vocabulary in individual counseling. It "made sense", was easy to implement, and effective, according to both teens and providers.

Discussion: The study had significant limitations, including a small sample size, and no long-term outcomes such as sexual and nonsexual recidivism. However, the results were encouraging enough to have this model incorporated into the ongoing treatment

program. These results were consistent with the recommendation of Cordoni (2010) who suggested the implementation evidence-based treatment models. The intervention was consistent with Lipsey's (2009) findings that programs that faithfully implemented with high-risk youth were more effective.

Conclusion: Ten years ago I started working in the field of JSO treatment. The dominant relapse prevention and sexual offense cycle models used then had major limitations. We now have a viable, evidence-based alternative, that is Prosocial models. These models include: (1) a theory of how adolescent social reasoning normatively develops, (2) what factors facilitate that normal growth and what can accelerate it, (3) what are modifiable criminogenic factors for sexual and nonsexual recidivism, based on those theories, (4) evidence based prosocial treatment models that improve these deficits that are cost effective to implement, and (5) models that are understandable to practitioners, are respectful to clients, provide a positive narrative regarding treatment, and "feel" like they work for both teens and practitioners. It is a useful and effective tool for programs, which are faced with both diminished funding, and mandates for evidence-based practice.

(1) (For information regarding implementing evidence based Prosocial interventions for JSO youth, contact Dr. Ralph at nbralph@comcast.net).

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CCOSO Board of Directors 2011

Robert Land, Chair Nominations and Elections Committee announced the results of the CCOSO elections:

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Recorder	Araceli Cabarcas, Psy.D., LMFT
Correspondent	Chris Bennett, L.M.F.T.

Noted too is that this is the first time in CCOSO's history where the entire Executive Board is all women! Congratulations!



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